

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			3-24-98
FORMALITY REVIEW	<i>(Signature)</i>	108104	3-31-98

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

Respected

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Objected

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Claim		Date	
Final	Original		
1	1	11/30/01	8/19/02
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25	0		
26	✓		
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Claim		Date	
Final	Original		
51	✓	11/30/01	8/19/02
52	0		
53	✓		
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81	✓		
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88	✓		
89	✓		
90	0		
91	✓		
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100	✓		

Claim		Date	
Final	Original		
101		11/30/01	8/19/02
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130	✓		
131	✓		
132	0		
133	✓		
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Resulted

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Objected

(2)

Claim	Final	Original	Date
1	✓	✓	11/20/02
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9	✓	✓	
10	✓	✓	
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20	✓	✓	
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24	✓	✓	
25	✓	✓	
26	✓	✓	
27	✓	✓	
28	✓	✓	
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30	✓	✓	
31			
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33			
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35			
36	✓	✓	
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40	✓	✓	
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42	✓	✓	
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44	✓	✓	
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49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	11/20/02
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57	✓	✓	
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60	✓	✓	
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68	✓	✓	
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80	✓	✓	
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85	✓	✓	
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99	✓	✓	
100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	11/20/02
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103	✓	✓	
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144	✓	✓	
145	✓	✓	
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149	✓	✓	
150	✓	✓	

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**.. Objected**

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Claim	Final	Original	Date
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